## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03-17-10	Address:	RRSouth of Hollywood Ave
Case #:	<u>24-31307</u>		Elkhart, IN
County:	<u>Elkhart</u>		
Type of Laboratory Seizure (check one)  Operational Lab		Seizure Location (check all that apply)	
	al/Glassware/Equipment (only)	☐ Residence ☐ Outbuilding ☐ Vehicle	<ul><li>☐ Hotel/Motel</li><li>☐ Open – No Structure</li><li>☐ Other:</li></ul>
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)    Lithium/Ammonia Reaction(s): Open			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Corrosive Acid:			
Corrosive Base:			
Other (it	rem and location):		
Child under age 18 discovered (check one)  Yes (number present)  No  *If yes, fax report to Child Protective Services		Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☐ Other:No Suspect	
This report	is to be faxed to the following agen	cies that serve the lo	cation:
Fire Departr	ment: Elkhart	Fax: <u>574-5</u>	···
Health Department: Elkhart County		Fax: <u>574-29</u> Fax:	
Child Protec	etion Service:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Anthony LoMonaco Phone 574-206-2931			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.